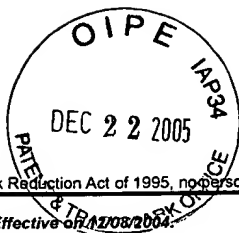


MS AF
REPLY UNDER 37 C.F.R. § 1.116
EXPEDITED PROCEDURE
EXAMINING GROUP

AF 2612
\$ 321

AMENDMENT TRANSMITTAL LETTER				Docket No. 0879-0277P																																											
Application No. 09/662,323	Filing Date September 14, 2000	Examiner K. L. Jerabek	Art Unit 2612																																												
Applicant(s): Seiichi MATSUI																																															
Invention: IMAGING APPARATUS, SOLID IMAGING DEVICE AND DRIVING METHOD FOR SOLID IMAGING DEVICE																																															
<p>MS AF Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450</p> <p>Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.</p> <table border="1" style="width: 100%; border-collapse: collapse;"><thead><tr><th colspan="6" style="text-align: center; padding: 5px;">CLAIMS AS AMENDED</th></tr><tr><th style="width: 15%;"></th><th style="width: 15%;">Claims Remaining After Amendment</th><th style="width: 15%;">Highest Number Previously Paid</th><th style="width: 15%;">Number Extra Claims Present</th><th style="width: 15%;">Rate</th><th style="width: 20%;"></th></tr></thead><tbody><tr><td style="text-align: left;">Total Claims</td><td style="text-align: center;">18</td><td style="text-align: center;">- 24 =</td><td style="text-align: center;">0</td><td style="text-align: center;">x</td><td></td></tr><tr><td style="text-align: left;">Independent Claims</td><td style="text-align: center;">6</td><td style="text-align: center;">- 6 =</td><td style="text-align: center;">0</td><td style="text-align: center;">x</td><td></td></tr><tr><td colspan="5" style="padding: 5px;">Multiple Dependent Claims (check if applicable) <input type="checkbox"/></td><td></td></tr><tr><td colspan="5" style="padding: 5px;">Other fee (please specify): Extension for response within first month</td><td style="text-align: right;">120.00</td></tr><tr><td colspan="5" style="padding: 5px;">TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</td><td style="text-align: right;">120.00</td></tr></tbody></table> <p><input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity</p> <p><input type="checkbox"/> No additional fee is required for this amendment.</p> <p><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed.</p> <p><input checked="" type="checkbox"/> A check in the amount of \$ 120.00 to cover the filing fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. 02-2448 as described below. A duplicate copy of this sheet is enclosed.</p> <p><input checked="" type="checkbox"/> Credit any overpayment.</p> <p><input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.</p> <div style="display: flex; justify-content: space-between; align-items: flex-end; margin-top: 20px;"><div style="width: 60%;"><p>Marc S. Weiner Attorney Reg. No.: 32,181</p><p>BIRCH, STEWART, KOLASCH & BIRCH, LLP 8110 Gatehouse Road Suite 100 East P.O. Box 747 Falls Church, Virginia 22040-0747 (703) 205-8000</p></div><div style="width: 35%; text-align: right;"><p>Dated: December 22, 2005</p></div></div>						CLAIMS AS AMENDED							Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate		Total Claims	18	- 24 =	0	x		Independent Claims	6	- 6 =	0	x		Multiple Dependent Claims (check if applicable) <input type="checkbox"/>						Other fee (please specify): Extension for response within first month					120.00	TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					120.00
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PTO/SB/17 (12-04v2)

Approved for use through 7/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004 Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2005		Complete if Known		
		Application Number	09/662,323	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	September 14, 2000	
		First Named Inventor	Seiichi MATSUI	
		Examiner Name	K. L. Jerabek	
TOTAL AMOUNT OF PAYMENT		Art Unit	2612	
(\$)		120.00	Attorney Docket No.	0879-0277P

METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☐ Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: _____

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, **except for the filing fee**

☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims
18	- 24 =	x	=	Fee (\$)
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Fee Paid (\$)
6	- 6 =	x	=	

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
	- 100 =	/50	(round up to a whole number) x	

4. OTHER FEE(S)

	Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)	
Other (e.g., late filing surcharge): 1251 Extension for response within first month	120.00

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	32,181
Name (Print/Type)	Marc S. Weiner	Telephone	(703) 205-8000
		Date	December 22, 2005